Mairel States of America

Department of Transportation—Iederal Aviation Administration

Supplemental Type Certificate

Number SA8374SW-D

This coelificate, issued to S-TEC Corporation

946 Pegram

Wolters Industrial Park Mineral Wells, Texas 76067

contifies that the change in the type design for the following product with the limitations and conditions

therefor as specified hereon meets the sirworthiness requirements of Port 3 of the Civil Air

Regulations

Coniginal Product - Type Cortificato Number: 3A23

Model: MT-7-235

Description of Trype Design Change:

Installation of S-TEC System 60 Two Axis Automatic Flight Guidance System, Model ST-495, with Optional Autotrim System, according to Bulletin No. 595, dated 9-17-93 and Master Drawing List No. 92589, dated 9-17-93 with Optional Flight Director/Steering Horizon or later FAA Approved revisions of the above data (28 Volt System).

Limitations and Conditions:

- 1. FAA/DAS Approved Airplane Flight Manual Supplement, P/N 891035S, dated 9-27-93 is required for Maule Model MT-7-235 or later FAA Approved revisions of the above supplement.
- Compatibility of this modification with other previously approved modifications must be determined by the installer.

This coolificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, rowched, or a termination date is otherwise established by the Administrator of the Fedoral Aviation Administration

Date of application: 9-20-93

Dato reisened:

Dalo of issuance:

9-27-93

Dalo amended:

By direction of the Administrator

Wittiam J. Thomas

DAS Staff Coordinator, DAS 5 SW

(Title)

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office the transfer of this Supplemental Type Certificate.
The FAA will reissue the certificate in the name of the transferee and forward it to him.
TRANSFER ENDORSEMENT
Transfer the ownership of Supplemental Type Certificate Number
to (Name of transferee)
(Address of transferee)(Number and street)
(City, State, and ZIP code)
from (Name of grantor) (Print or type)
(Address of grantor)(Number and street)
(City, State, and ZIP code)
Extent of Authority (if licensing agreement):
Date of Transfer:
Signature of grantor (In ink):